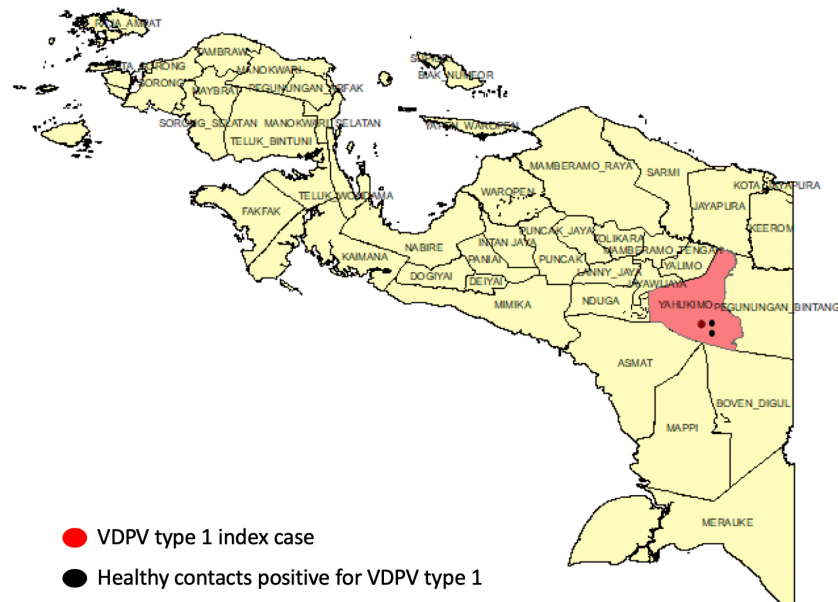


Indonesia cVDPV1 Outbreak Situation Report #5

17 May 2019

For internal circulation only

cVDPV1 cases in Papua Province, Indonesia, 2018 - 2019



Weekly Highlights

- No new cases reported this week - epi week 19
- The total number of confirmed circulating vaccine derived poliovirus type 1 (cVDPV1) in Indonesia remains 1 - positive samples from two healthy children have been collected confirming the circulation of VDPV type 1 in Yahukimo District, Papua Province.
- The second polio immunization response round is ongoing in all districts of West Papua and in low-land districts of Papua province. Round 2 started in these areas on the 29 April. In West Papua, efforts are focused on sweeping door to door for any missed children and starting Rapid Convenience Assessments (RCAs) to identify missed children and ensure uniform coverage. In Papua, efforts are ongoing to strengthen reporting from districts and ensure implementation is completed in all low land districts as soon as possible.
- Round 2 vaccination started in Yahukimo District on Monday 13 May as planned. Initial feedback from the ground is that operations are going well. More than 50 chartered flights to reach the projected 59 landing sites in isolated communities at the epi-centre of this outbreak, have been completed this week. Coverage data from these intense efforts should start to be available in the coming days.
- High level coordination meetings this week between stakeholders and the Papua Provincial Health Office (PHO) have agreed that vaccination in the other 16 high-risk districts will intensify once Yahukimo District has finished vaccination and lessons can be distilled to support high coverage in these other areas.
- Significant additional funding will be needed to charter helicopters, planes and speed boats for these areas. Internal discussions are underway within the PHO and Ministry regarding execution and external resource requirements.
- Four new AFP cases from Papua have been officially reported this week – the total number of AFP cases officially reported from Papua in 2019 is 21 and 3 in W. Papua.

Summary

New cVDPV1 cases this week: 0
Total number of cVDPV1 cases: 1
Total number of healthy children contact positive for VDPV1: 2
Outbreak grade: 1
Most recent detection: 13 Feb 2019

Case Details

Sex: Male
Age: Thirty-one months
Onset of paralysis: 27 Nov 2018
Vaccination status: 0 dose

Infected Area

Dekai Subdistrict
Yahukimo District
Papua Province

Outbreak Response

Where: Papua and West Papua
Who: All children 0 to below 15 years
Target: 1.26 Million Children
Vaccine Type: bopv

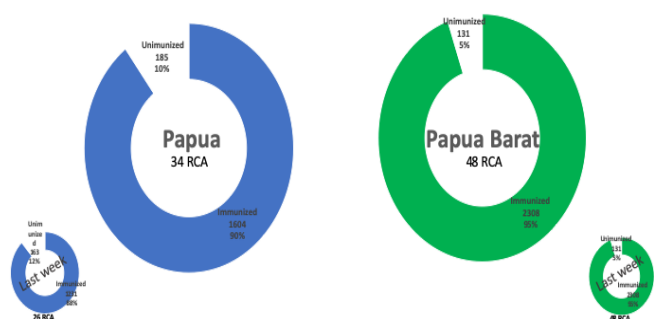
Immunization Response

- Indonesia has adopted a differentiated approach for reaching all children that is tailored to 3 geographical and social risk zones (1) West Papua (2) Papua accessible/lowlands, and (3) Papua poorly accessible/highland areas.
- Travelers visiting Papua for longer than four weeks are being vaccinated at points of entry until the outbreak is closed. To date, more than 1000 travelers have already been vaccinated at 5 transit points, including airports and main shipping ports.
- West Papua Port Authority has also started transit vaccination at seaports, airports and malls in a number of districts including Sorong and Manukwari.
- Border vaccination is taking place in 5 districts with official border crossings between Papua Province and Papua New Guinea.

Round 1

- The first polio sub-national polio response round, targeting children 0 to below 15 years with a supplementary dose of bivalent oral polio vaccine (bOPV) was completed on 28 April. It has taken several weeks to report the total number of children vaccinated. As of May 16 - 1,003,981 of the 1,262,880 targeted children in both provinces have been reported vaccinated.
- In West Papua all 13 districts reported reaching at least 95% of the targeted population with many districts reaching more than 100% of the estimated target.
- In Papua Province, 11 of 29 districts reached 95% coverage. A further three reached more than 80% coverage. Fifteen districts have coverage reported at less than 80%, including Yahukimo District with coverage reported at 17%. This data differs slightly to previous weeks as the dates of reported vaccination from each local health centre has been validated against the dates of the round.
- Approximately 260,000 children 0-15 years were missed during round 1. Almost all of these children live in very hard to reach districts of the highlands in Papua province. (see below)
- Rapid Convenience Assessments (RCA) continued this week in districts of Papua where reported coverage had not been validated. As of 17 May, 48 RCA have been conducted in West Papua assessing 2439 children across 12/13 districts with coverage levels of 95%. In Papua, 34 RCAs in 4/29 districts have been completed assessing 1789 children with coverage levels of 90%.

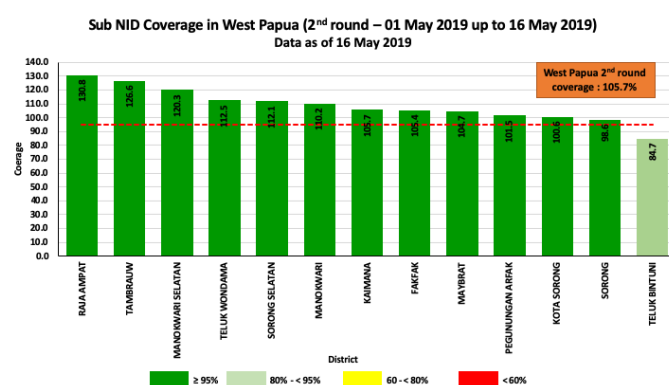
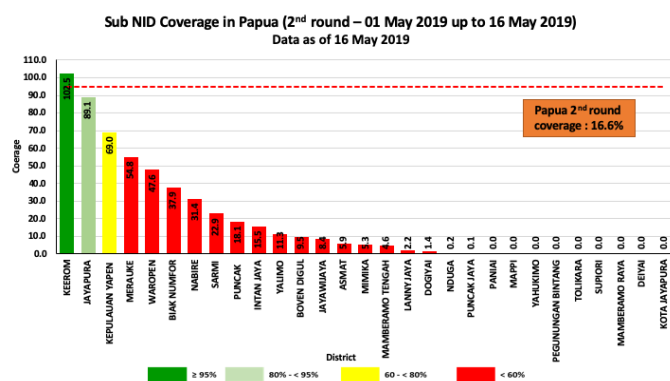
RCA: Observation to Sub-PIN target houses



Left: Rapid Convenience Assessments (RCA) are designed to validate reported coverage from round 1 and identify any missed children Right: Children in Lanny Jaya, Papua province receive an additional dose of OPV to protect them from polio paralysis
Credit: Yurniati Nurung/ WHO Indonesia

Round 2

- Round 2 of the polio sub-national outbreak response has begun in all districts of West Papua and in low land districts of Papua province. As of May 16, reported coverage from West Papua which is nearing completion is 106%. Coverage in Papua where round 2 is being staggered is currently reported at 17%. Complete and regular district reporting of coverage from many areas of Papua remains challenging.
- Work is ongoing to support districts implement the round as soon as possible. Support teams from the PHO, WHO and UNICEF have met with DHOs in Kota Jayapura, Boven Digul and Biak this week to help address local challenges.
- Vaccination in Yahukimo district has started this week after intensive planning by DHO, PHO, MoH. UNICEF and supporting partners. After a final review, total landing sites have increased from 47 to 59 and more than 50 sorties have already been flown to these remote communities by either fixed wing planes or helicopters. Religious and traditional leaders from local communities are joining the flights to ensure community mobilization and support. Initial field reports indicate the operation is going well and should be complete next week with coverage data available shortly after.
- To monitor performance and identify missed children West Papua have developed an extensive plan to conduct Rapid Convenience Assessments (RCAs) in all districts starting 20 May.



Data valid as of 16 May



Left: Vaccination and monitoring through RCA continue in Biak District, Papua Credit: Ibu Niprida/WHO Indonesia Right: A joint delegation from DFAT, WHO and UNICEF meet with the Provincial Secretary Papua Health Office dr. Silwanus Sumule, Sp. OG. Credit: Papua PHO Indonesia

Surveillance Summary

- In 2018, Indonesia's non-polio acute flaccid paralysis (NP AFP) rate was 2.14 with a stool specimen adequacy rate of 79%. 13 provinces of 34 met both key indicators for AFP surveillance: >2 or more non-polio AFP cases per 100,000 children below 15 years of age and >80 percent or above AFP cases with adequate specimens.
- Nationally, one hundred and forty-six AFP cases reported in 2018, which tested lab negative for poliovirus, are pending final classification by Indonesia's Expert Review Committee.
- In 2019, Indonesia's NP AFP rate is 1 with a stool specimen adequacy rate of 83%.
- In 2019, Papua province has a NP AFP rate of 2.5 with stool collection at 50%. West Papua has recently reported three AFP cases and lab results are awaited.
- Active surveillance and AFP case reporting continues to increase in both provinces compared to previous years. Four AFP cases have been officially reported this week from Papua. However, stool samples in two of these cases were collected more than two weeks after on-set of paralysis in the affected child. Several additional cases from both provinces have been provisionally reported and after detailed investigation these will be included in official data as soon as reports are received.
- Lab results for 4 AFP cases reported from Papua and West Papua are currently awaited.
- Environmental surveillance samples were taken from a site in Yahukimo district on the 16 May. The MoH is developing a plan to ensure more regular collection of environmental samples are taken from established sites in Papua as well as evaluating expanding ES in new districts in both Papua and West Papua.

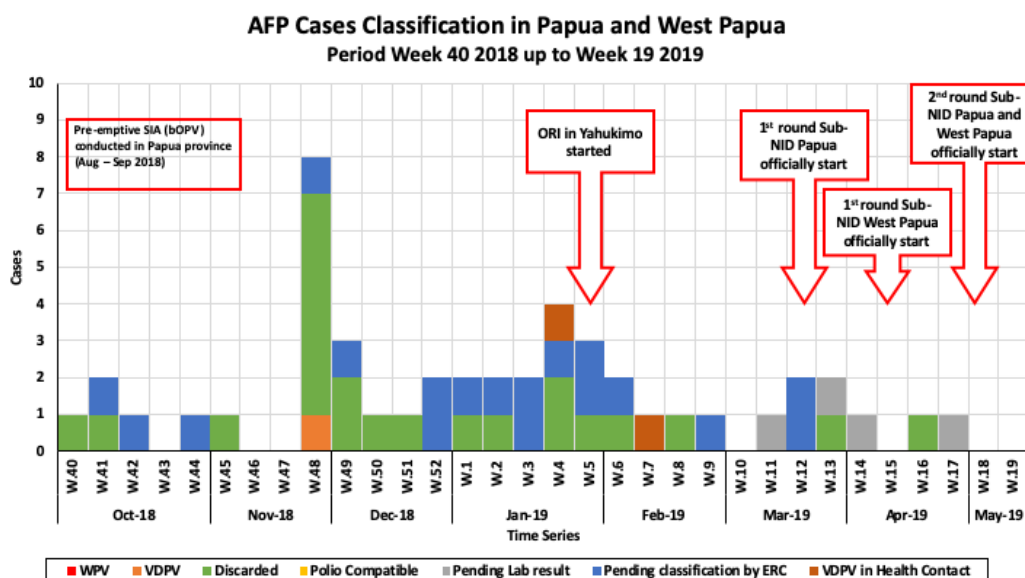


- Hospital Record Reviews (HRR) in 12 high-risk provinces continue. Reviews have already taken place in major hospitals of 7 of the 12 high risk provinces, including Papua and West Papua. A number of missed AFP cases were found during the exercise and have proved important opportunities to re-sensitize district, health centre and hospital staff on the importance of timely and accurate AFP reporting. Plans to conduct reviews in the 5 remaining provinces targeted for HRR have been finalized this week.

- Weekly reporting from hospitals and health centres in both Papua and West Papua is ongoing but remains low in some areas.

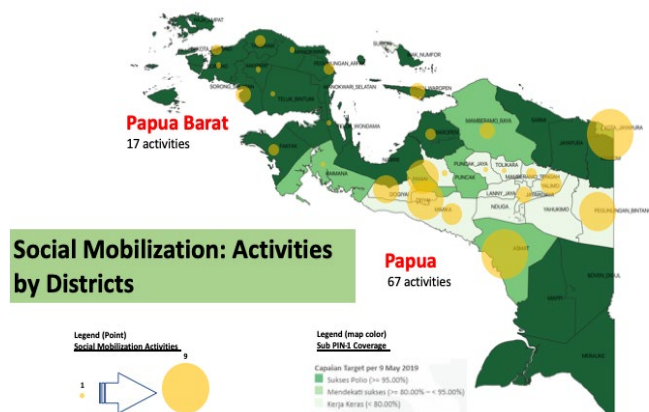
- Additional AFP posters, reporting posters and charts highlighting diagnosis that needs to be reported have been printed and sent to all districts of Papua and West Papua.

A Technical Officer from BTKL Ambon works with local staff to collect environmental samples from the Moruku River, Yahukimo District, Papua 16 May, 2019 Credit: Indreni Waridgo/WHO Indonesia



Communication and Social Mobilization

- A reflection meeting was held in Jayapura, Papua from 16 to 17 May with NGO partners supporting social mobilization (GAPAI, YP2KP and Wahana Visi) asked to share the challenges in the field and explore solutions.
- Community engagement particularly through the churches has helped access unreached communities. World Vision and YP2KP contracted local villagers to facilitate access and overcome communication challenges.
- A total of 17 social mobilization activities reaching 817 influencers have been conducted to West Papua that target caregivers, community, traditional and religious leaders, health workers and other influencers. In Papua 67 activities reaching 7912 influencers have taken place including in most high risk districts.



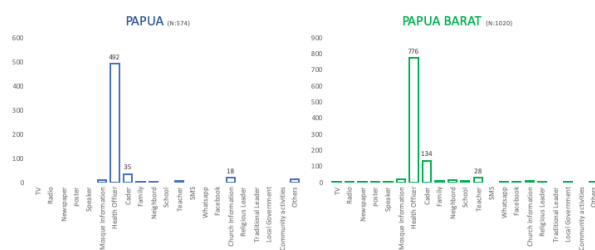
- Social mobilization activities consisted of community/leadership engagement in microplanning processes, developing IEC materials (PSA, booklets for health worker/cadres, posters, flipcharts, local radio talk shows), developing materials for Sunday sermons at churches and focus groups with local leaders/tribes/religious leaders.

- Both in Papua and Papua Barat Health Officers and cadres emerged as the key source of information to families about the polio rounds conducted, followed by the church and the teachers / schools. In the Papua highlands the health officers and the church were the most trusted

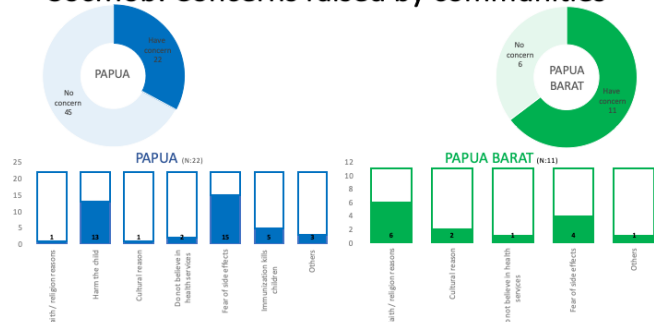
source of information, while in West Papua, the trusted source of information were the health officers and cadres (community health workers), the mosque, the school and the teachers.

- In the Papua highlands, health officers and the church were identified as the primary trusted sources of information. In the lowlands of Papua, mosques and the teachers were also identified as important sources of information about the polio campaign.
- The reasons for children not being immunized during the SIAs were similar in both Papua and West Papua. Lack of information altogether about the polio rounds or not knowing the location, date and time when they would be held came up as an important reason. Even more significant were reasons such as parents travelling or children who were sick, alongside the fear of side-effects from polio immunization. This points to the need for providing accurate information to caregivers through trusted sources and adapting the messages to address reasons for missing children.
- Social mobilization activities also report about concerns regarding vaccination. The primary concerns raised in Papua were fear of side-effects, harm to the child and the belief that immunization kills. In West Papua, religious reasons also constituted a concern.

RCA: The most trusted Information



SocMob: Concerns raised by communities



Right: CDC manager for Papua Province Dr. Aron talks to Radio Republic Indonesia (RRI) to raise awareness about the importance of polio vaccination. Credit: Papua PHO Indonesia

Surge Support

Ministry of Health

- The Indonesian Ministry of Health continues to deploy senior experts to Papua and West Papua Provinces to support the planning, monitoring, coordination and evaluation of polio response activities.
- Director General Communicable Disease was again in both Papua and West Papua this week with a senior team to review round 2 progress.
- A team of senior immunization staff, both technical and administrative, have been identified to travel to Papua and West Papua at the end of the month. The teams will review performance of immunization, surveillance and social mobilization with the aim of documenting lessons to further programme improvements.

WHO

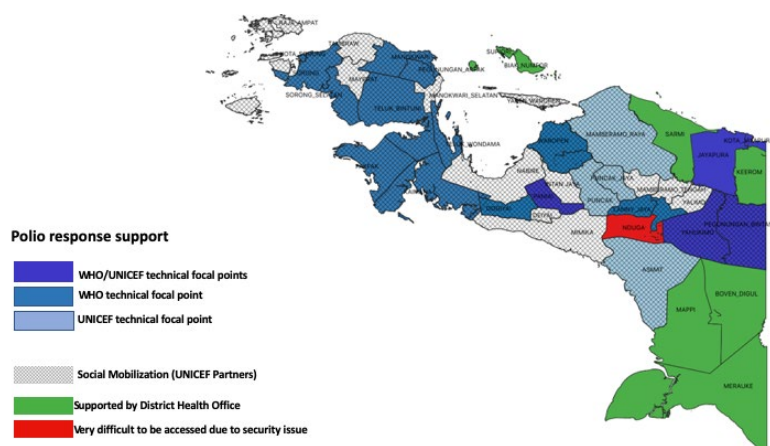
- WHO have established a field office in Papua Province and recruited 10 national officers to support Papua and West Papua. A senior NPO from Jakarta has been deployed all of May to assist the local team.
- Two international consultants are currently assisting with data, information analysis and communication coordination/management.
- WHO HQ polio staff has completed his four-week deployment in West Papua and Papua this week and has debriefed with senior ministry and partner focal points.
- WHO is currently recruiting 3 additional local data managers in outbreak areas to support data collection and analysis. Interviews for the positions are scheduled for next week.
- WHO SEARO regional polio focal point will travel to Papua to support round 2 implementation in highland areas.

UNICEF

- UNICEF has two established field offices in the capitals of Papua and West Papua Provinces. These teams have been re-enforced with surge support of national officers and consultants for immunization and C4D; alongside re-deployment of EPI specialists from Jakarta and other field offices across Indonesia.
- Two international consultants - an immunization and communication specialist arrived in Jakarta this week for a three-month deployment.

Other

- 60 Red Cross (RC) Volunteers continue to provide support to local Puskesmas staff vaccinating (giving oral vaccination) and marking children that have been vaccinated (covering 12 Puskesmas in Jayapura district).
- Rotary continues to provide Soc Mob and IEC material support in key districts of Papua and West Papua.
- CDC Indonesia office is strengthening their support for outbreak response operations through the Indonesian Epidemiologist Association (PAEI). A training of PAEI district focal points took place in Jayapura this week. District focal points will primarily support the regular and timely reporting of AFP cases and strengthen monitoring by conducting RCA.



Partner support May 17	At national level Int'l staff	Nat Staff	Papua Province	Papua Barat	Other Provinces
WHO	4	7	9	2	10
UNICEF	2 (2 pending)	7	12	2	3 (surge to Papua)
Other					

Coordination

- The Ministry of Health continues to lead and coordinate government and partner support for all polio outbreak response activities. Weekly meetings at a national and provincial level help to coordinate activities and monitor the implementation of the polio outbreak response plan at local levels.
- A senior representative of the Minister of Health (Health Ministers Advisor) has been nominated to directly support Indonesia's polio outbreak response and will travel weekly to Papua to work through budgeting and operational issues.
- Strong cross-ministerial support has been received early in the campaign through the office of the President's Chief of Staff, who have brought together the ministries of finance, home affairs and the military – the latter who have offered logistical support where needed.
- A delegation from polio partners was in Papua through the week and met with senior PHO officials to review progress and discuss how to improve AFP surveillance sensitivity and rapidly increase the quality of supplementary immunization activities (SIA) especially in high land districts of the province.
- A joint WHO/UNICEF video conference between national and provincial teams from Papua and West Papua was held on Thursday this week and will continue on a weekly basis.
- Rotary International and IFRC continue to provide valuable support in mobilizing local communities working with local NGO and church groups to sensitize and build demand for polio vaccination. A weekly partners meeting hosted by WHO in Jakarta helps coordination and sharing of strategies and tools between key partners.

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Left: Round two polio vaccination in Wamindik Village, Lanny Jaya District, Papua province Credit: Yurniati Nurung / WHO Indonesia Middle: Sweeping in Elagaima, Papua province Credit: Veronika Dwi Utami / WHO Indonesia Right: School vaccination continues in Papua province where all children from 0 to less than 15 years of age are targeted for an additional dose of oral polio vaccine Credit: UNICEF/Indonesia